

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: WIRE ROPE CORP. OF AMERICA  
ATTN: ENVIRONMENTAL MANAGER  
2100 MANCHESTER AVE.  
EPA ID NO: KANSAS CITY, MO 64126  
EPA ID: MOD001686740 MO ID: 004028



U.S. ENVIRONMENTAL  
PROTECTION AGENCY

1997 Hazardous Waste Report

FORM  
IC

IDENTIFICATION AND  
CERTIFICATION

Instructions: Please see the detailed instructions beginning on page 7 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each section is provided below.

<b>Sec. I</b>	Site name and location address. Check the box <input type="checkbox"/> in items A, B, C, E, F, G, and H if same as label; if different, enter corrections. If label is absent, enter information. Instructions page 7.		
A. EPA ID No. Same as label <input checked="" type="checkbox"/> or →		B. County Same as label <input type="checkbox"/> or → JACKSON	
C. Site/company name Same as label <input checked="" type="checkbox"/> or →		D. Has the site name associated with this EPA ID changed since 1995? <input type="checkbox"/> 1 Yes <input checked="" type="checkbox"/> 2 No	
E. Street name and number. If not applicable, enter industrial park, building name, or other physical location description. Same as label <input checked="" type="checkbox"/> or →			
F. City, town, village Same as label <input checked="" type="checkbox"/> or →		G. State Same as label <input checked="" type="checkbox"/> or →	H. Zip Code Same as label <input checked="" type="checkbox"/> or →

<b>Sec. II</b>	Mailing address of site. Instructions page 7.		
A. Is the mailing address the same as the location address? <input checked="" type="checkbox"/> 1 Yes (SKIP TO SEC. III) <input type="checkbox"/> 2 No (CONTINUE TO BOX B)			
B. Number and street name of mailing address			
C. City, town, village		D. State	E. Zip Code

<b>Sec. III</b>	Name, title, and telephone number of the person who should be contacted if questions arise regarding this report. Instructions page 7.			
A. Last Name	First name	M.I.	B. Title	C. Telephone Number
JOSENDACE	Peter	B	MANAGER ENVIRONMENTAL SERVICES	8116 242-3125 Extension

<b>Sec. IV</b>	"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties under Section 3008 of the Resource Conservation and Recovery Act for submitting false information, including the possibility of fine and imprisonment for knowing violations." Instructions page 8.			
A. Last Name		First name	M.I.	B. Title
Burchett		LARRY	R	Operations Manager
C. Signature			D. Date of signature	
Larry R Burchett			02 04 98 Month Day Year	



R00114905  
RCRA RECORDS CENTER

BR5  
BY BRITT  
ON ENT'D JUL 24 1998

QC'D BR5 1/6/99

EPA ID NO. M0D 001 686 740**Sec. V** Generator status. Instructions begin on page 8.**A. 1997 RCRA generator status**

(CHECK ONE BOX BELOW)

- ☒ 1 LQG  
☐ 2 SQG  
☐ 3 CESQG  
☐ 4 Non-generator (CONTINUE TO BOX B)

} SKIP TO SEC. VI

**B. Reason for not generating**

(CHECK ALL THAT APPLY)

- ☐ 1 Never generated  
☐ 2 Out of business  
☐ 3 Only excluded or delisted waste  
☐ 4 Only non-hazardous waste  
☐ 5 Periodic or occasional generator  
☐ 6 Waste minimization activity  
☐ 7 Other (SPECIFY IN COMMENTS BOX BELOW)

**Sec. VI** On-site waste management status. Instructions page 10.**A. Storage subject to RCRA permitting requirements**1**B. Treatment, disposal, or recycling subject to RCRA permitting requirements**1

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: Wire Rope Corporation Of America, Inc.  
2100 Manchester Kansas City, Missouri 64126

EPA ID NO: MOD 001 686 740

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1997 Hazardous Waste Report

FORM  
GMWASTE GENERATION  
AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

<b>Sec. I</b> A. Waste description (page 12)					
Acid rinse water from steel rod and wire cleaning					
B. EPA hazardous waste code (page 12)			C. State hazardous waste code (page 13)		
D1002					
D. SIC code (page 13)		E. Origin code (page 13)	F. Source code (page 14)	G. Point of measurement (p. 14)	H. Form code (page 14)
3315		1 System Type M	A26	1	B105
I. RCRA-radioactive mixed (page 14)					
2					

<b>Sec. II</b> A. Quantity generated in 1997 (page 15)		B. UOM (page 15)	C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15)	
4417089.0		5 Density 01.20 <input type="checkbox"/> 1 lbs/gal <input checked="" type="checkbox"/> 2 sg	<input checked="" type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input type="checkbox"/> 2 No (SKIP TO SEC. III)	
<b>ON-SITE PROCESS SYSTEM 1</b>			<b>ON-SITE PROCESS SYSTEM 2</b>	
On-site process system type (page 16)	Quantity treated, disposed, or recycled on site in 1997 (page 16)	On-site process system type (page 16)	Quantity treated, disposed, or recycled on site in 1997 (page 16)	
M1135	4417089.0	M		

<b>Sec. III</b> A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17)				
<input type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input checked="" type="checkbox"/> 2 No (FORM IS COMPLETE)				
Site 1	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17)	D. Off-site availability code (page 17)	E. Total quantity shipped in 1997 (page 17)
		M		
Site 2	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17)	D. Off-site availability code (page 17)	E. Total quantity shipped in 1997 (page 17)
		M		
Site 3	B. EPA ID No. of facility waste was shipped to (page 17)	C. System type shipped to (p. 17)	D. Off-site availability code (page 17)	E. Total quantity shipped in 1997 (page 17)
		M		

Comments:

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GM

WASTE GENERATION  
AND MANAGEMENT

Instructions: Please see the detailed instructions beginning on page 11 of the instructions and forms booklet before completing this form. In addition, the page number for instructions specific to each box is provided in parentheses.

<b>Sec. I</b>					
A. Waste description (page 12) Polychlorinated Biphenyls contaminated oil from transformer repairs					
B. EPA hazardous waste code (page 12) N O N E			C. State hazardous waste code (page 13) M O O 9		
D. SIC code (page 13) 3 3 1 5	E. Origin code (page 13) 1	F. Source code (page 14) A 9 9	G. Point of measurement (p. 14) 1	H. Form code (page 14) B 2 1 9	I. RCRA-radioactive mixed (page 14) 2

<b>Sec. II</b>		A. Quantity generated in 1997 (page 15) 1 1 3 0 . 0		B. UOM (page 15) 3 Density <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? (page 15) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)
<b>ON-SITE PROCESS SYSTEM 1</b>			<b>ON-SITE PROCESS SYSTEM 2</b>		
On-site process system type (page 16) M		Quantity treated, disposed, or recycled on site in 1997 (page 16) 1 1 3 0 . 0		On-site process system type (page 16) M	

<b>Sec. III</b>				
A. Was any of this waste shipped off site in 1997 for treatment, disposal, or recycling? (page 17) <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (FORM IS COMPLETE)				
Site 1	B. EPA ID No. of facility waste was shipped to (page 17) M O D 0 6 9 2 7 7 5 4 9	C. System type shipped to (p. 17) M O 4 1	D. Off-site availability code (page 17) 1	E. Total quantity shipped in 1997 (page 17) 1 1 3 0 . 0
Site 2	B. EPA ID No. of facility waste was shipped to (page 17) 	C. System type shipped to (p. 17) M	D. Off-site availability code (page 17) 	E. Total quantity shipped in 1997 (page 17) 
Site 3	B. EPA ID No. of facility waste was shipped to (page 17) 	C. System type shipped to (p. 17) M	D. Off-site availability code (page 17) 	E. Total quantity shipped in 1997 (page 17) 

Comments:

Sec. I F: Repair of Transformer  
Sec. I H: Transformer Oil contaminated with PCB's